



## Lottery Application

Only one lottery application per person will be accepted. "Person," as defined in ARM 42.12.401, means any individual, firm, partnership, limited liability company, corporation or association. Incomplete applications will be disqualified.

### Section 1 – Lottery Type Information

Quota Area **Columbus** Tracking Number **B5**  
For DOR Office Use

#### Lottery Type

☒ CITY BEER IN THE CITY OF **Columbus**

### Section 2 – Ownership Information

Legal Applicant/Entity (not the business name) \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Address City State Zip

#### Entity Type (choose one)

☐ Corporation ☐ Partnership ☐ LLC ☐ Other \_\_\_\_\_

☐ Sole Proprietor \_\_\_\_\_  
Name Social Security Number Date of Birth

### Section 3 – Corporate Statement

If applying as an entity, please list all shareholders, members, and/or partners below. Use an additional sheet of paper if necessary. Please note that each person listed must be over the age of 19.

1	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
2	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
3	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
4	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership

### Section 3 – Corporate Statement continued.

Officers and Directors (Use additional sheet of paper if necessary.)

1	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
2	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
3	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
4	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title

### Section 4 – Floater Application Requirements Only

*“Floater” means an “all-alcoholic beverages license that may be transferred to a new location outside the quota area for which it was originally issued.” This type of license cannot be mortgaged or sold for five years after the transfer. A floater license which is issued as the result of a lottery will have a gaming restriction.*

Has the applicant applied for a “Floater” All-Alcoholic Beverages lottery within the previous 12 months?

☐ Yes    ☐ No    (If yes, you do not qualify for entry in this lottery.)

Does the applicant have ownership interest in an All-Alcoholic Beverages license?

☐ Yes    ☐ No    (If yes, you do not qualify for entry in this lottery.)

All applicants must submit an irrevocable letter of credit from a financial institution guaranteeing the applicant a \$100,000 line of credit. The letter must state that the financial institution will not withdraw the line of credit or cancel the letter for a one-year period from the date of the lottery drawing. Acceptable letter content includes the following:

This irrevocable letter of credit is to confirm that [bank] has approved [lottery applicant] for a \$100,000 line of credit for the purchase of a liquor license should they be the successful winner of the all-beverage floater license lottery. [Bank] guarantees that it will not withdraw this line of credit or cancel this letter. [Bank's] commitment under the line of credit shall expire on [one year from date of lottery drawing].

The Department will not accept letters stating that the applicant is eligible to receive a bank loan that do not include a guarantee that the bank will not withdraw the line of credit or cancel the letter, nor will it accept letters stating that the applicant has the ability to pay \$100,000 without a guaranteed line of credit. Any application without an acceptable irrevocable letter of credit will be disqualified from the lottery.

☐ Attached is an irrevocable letter of credit from a financial institution guaranteeing a \$100,000 line of credit.

## Section 5 – RESTAURANT BEER/WINE (RBW) ONLY

A **“Preference”** must be given to an applicant who does not yet have in any quota area a RBW or retail beer license and who operates a restaurant that is in the quota area in which the license has become available and that meets the definition of a restaurant for at least 12 months immediately prior to filing an application.

**“Restaurant”** means a public eating place where individually priced meals are prepared and served for on-premises consumption, where at least 65% of the restaurant’s annual gross income from the operation must be from the sale of food and not from the sale of alcoholic beverages. The restaurant must have a dining room, a kitchen and the number and kinds of employees necessary for the preparation, cooking and serving of meals in order to satisfy the department that the space is intended for use as a full-service restaurant and that serves a dinner evening meal at least four days a week for at least two hours a day between the hours of 5 p.m. and 11 p.m. The term does not mean a fast-food restaurant that, excluding any carry-out business, serves a majority of its food and drink in throw-away containers not reused in the same restaurant.

Has your restaurant operated as a “restaurant” (as defined above) and has it operated at least 12 months immediately prior to the lottery application in the quota area in which you are applying?

☐ Yes    ☐ No    (If yes, provide business name and physical address of the premises below.)

Business Name	Address	City	State	Zip
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If seasonal, has your restaurant operated as a “restaurant” and has it operated at least 12 months (during your normal business season) immediately prior to the lottery application in the quota area in which are you applying?

☐ Yes    ☐ No

## Section 6 – Declaration and Affidavit

If my application is drawn in the lottery, I understand that I must submit a completed license application and the appropriate fees within 30 days (60 days for a “floater”) of being notified that I was the successful applicant. I further understand that information concerning ownership on this application must be consistent with the license application and supporting documents or I will be disqualified. For example, if you complete this application as an “individual,” and are the successful applicant, your subsequent license application must also be as an individual.

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making this application, and that the responses provided, including any accompanying information, are true, correct and complete.

Signature	Date	Printed Name	Title
Signature	Date	Printed Name	Title
Signature	Date	Printed Name	Title

You must submit this lottery application by the deadline set in the publication notice by mailing to:

Montana Department of Revenue  
Liquor Control Division  
PO Box 1712  
Helena, MT 59624-1712

**Questions?** Call us toll free at 1-866-859-2254 (in Helena, 444-6900), or fax 406-444-0722.